

institution, the Parliamentary Forum of the Community of Democracies, expressed its solidarity with these Cuban rights fighters, fighters for freedom. And in that way, demonstrated its genuine commitment to furthering democratic institutions and assisting those who are fighting for freedom.

The resolution today, Mr. Speaker, that will be passed by the Congress of the United States in support of commending the Community of Democracies on its 10th anniversary is timely. I wholeheartedly support it. I commend the Community of Democracies for 10 years of leadership, and I urge all of my colleagues to vote for this resolution.

Again, thank you, Mr. ENGEL. Thank you Ms. ROS-LEHTINEN. This is an important and timely resolution. These are friends of freedom that we're commending today, an institution that, as Ms. ROS-LEHTINEN pointed out, is not there for cocktail parties or press releases. And it doesn't allow itself to be tarnished, like abominable institutions such as the so-called Human Rights Council of the United Nations, to be tarnished by, in effect, defending tyrannies. The Community of Democracies is that, a community of democracies that stands for and believes in freedom and democracy. That's why it's appropriate to commend them on their 10th anniversary.

#### THE COMMUNITY OF DEMOCRACIES PARLIAMENTARY FORUM

RESOLUTION CALLING FOR SUPPORT OF CUBA'S  
PRO-DEMOCRACY MOVEMENT, THE CONVENING  
MEETING, 2010 MARCH 12

Whereas the pro-democracy movement in Cuba has grown at a rapid pace over the last three years, and specific expressions of the movement are evident today in the explosion of bloggers on the island, independent journalists, musicians, artists, writers, and others, who are using their talents to denounce the atrocities of the dictatorship all while putting forth new ideas for the transition to democracy;

Whereas there are still extraordinary obstacles to overcome such as the continued repression by the totalitarian dictatorship, extremely limited access to the Internet and "texting" capabilities, and a lack of a coherent message of solidarity from the international community;

Whereas the dictatorship is fearful of the growth of the pro-democracy movement;

Whereas the message of the Movement is coherent and clear in demanding freedom for all Cuban political prisoners, beginning with those who are gravely ill inside the prison, freedom of expression and free, fair multiparty elections with international supervision;

Whereas this common position of the Cuban pro-democracy movement requires greater recognition, dissemination and solidarity on the part of the Community of Democracies;

Whereas now more than ever the Cuban pro-democracy movement requires that the democratic community takes concrete steps to demonstrate its solidarity; Now, therefore be it

*Resolved*, That the Community of Democracies Parliamentary Forum—  
condemns the brutality of the Cuban regime against Cuban political prisoners;  
expresses its full support for the Cuban pro-democracy movement;

honors Cuban pro-democracy fighters such as the martyr Orlando Zapata Tamayo and expresses its admiration for the efforts of other heroes such as Guillermo Farifias;

calls for the immediate release of all Cuban political prisoners and free multiparty elections in Cuba; and

calls on the democratic community to take concrete steps in demonstrating their solidarity with the Cuban pro-democracy movement by providing humanitarian and technological assistance to the pro-democratic movement, urging certain foreign diplomatic posts in Havana to strengthen contacts with pro-democratic activists on the island, encouraging foreign dignitaries to visit Cuba for the sole purpose of meeting with pro-democratic activists, and looking for opportunities to reiterate and support the common position of the Cuban pro-democracy movement in the international community.

Ms. ROS-LEHTINEN. Mr. Speaker, I yield back the balance of my time.

Mr. ENGEL. Mr. Speaker, I yield back the balance of my time as well.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. ENGEL) that the House suspend the rules and agree to the resolution, H. Res. 1143, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution, as amended, was agreed to.

A motion to reconsider was laid on the table.

#### COMMENDING PROGRESS MADE BY ANTI-TUBERCULOSIS PROGRAMS

Mr. ENGEL. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 1155) commending the progress made by anti-tuberculosis programs, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

#### H. RES. 1155

Whereas tuberculosis (hereafter in this preamble referred to as "TB") is the second leading fatal global infectious disease behind HIV/AIDS, claiming 1,800,000 million lives each year;

Whereas the global TB pandemic and the spread of drug resistant TB present a persistent public health threat to the United States;

Whereas according to 2009 data of the World Health Organization, 5 percent of all new TB cases are drug resistant;

Whereas TB is the leading killer of people with HIV/AIDS;

Whereas TB is the third leading killer of adult women, and the stigma associated with TB disproportionately affects women, causing them to delay seeking care and interfering with treatment adherence;

Whereas the Institute of Medicine (IOM) found that the resurgence of TB between 1980 and 1992 was caused by cuts in TB control funding and the spread of HIV/AIDS;

Whereas, although the numbers of TB cases in the United States continue to decline, progress towards TB elimination has slowed, and it is a disease that does not recognize borders;

Whereas New York City had to spend over \$1,000,000,000 to control a multi-drug resistant TB outbreak between 1989 and 1993;

Whereas an extensively drug resistant form of TB, known as XDR-TB (hereafter re-

ferred to in this preamble as "XDR-TB"), is very difficult and expensive to treat and has high and rapid fatality rates, especially among HIV/AIDS patients;

Whereas the United States has had more than 83 cases of XDR-TB over the last decade;

Whereas the Centers for Disease Control and Prevention estimated in 2009 that it costs \$483,000 to treat a single case of XDR-TB;

Whereas African Americans are 8 times more likely to have TB than Caucasians, and significant disparities exist among other United States minorities, including Native Americans, Asian Americans, and Hispanic Americans;

Whereas, although drugs, diagnostics and vaccines for TB exist, these technologies are antiquated and are increasingly inadequate for controlling the global epidemic;

Whereas the most commonly used TB diagnostic in the world, sputum microscopy, is more than 100 years old and lacks sensitivity to detect TB in most HIV/AIDS patients and in children;

Whereas current tests to detect drug resistance take at least 1 month to complete and faster drug susceptibility tests must be developed to stop the spread of drug resistant TB;

Whereas the TB vaccine, BCG, provides some protection to children, but has little or no efficacy in preventing pulmonary TB in adults;

Whereas there is also a critical need for new TB drugs that can safely be taken concurrently with antiretroviral therapy for HIV;

Whereas enactment of the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008 and the Comprehensive TB Elimination Act provide an historic United States commitment to the global eradication of TB, including to the successful treatment of 4,500,000 new TB patients and 90,000 new multi-drug resistant (MDR) TB cases by 2013, while providing additional treatment through coordinated multilateral efforts;

Whereas the United States Agency for International Development provides financial and technical assistance to nearly 40 highly-burdened TB countries and supports the development of new diagnostic and treatment tools, and is authorized to support research to develop new vaccines to combat TB;

Whereas the Centers for Disease Control and Prevention, working in partnership with States and territories of the United States, directs the national TB elimination program and essential national TB surveillance, technical assistance, prevention activities and supports the development of new diagnostic, treatment and prevention tools to combat TB;

Whereas the National Institutes of Health, through its many institutes and centers, plays the leading role in basic and clinical research into the identification, treatment and prevention of TB;

Whereas the Global Fund to Fight AIDS, Tuberculosis and Malaria provides 63 percent of all international financing for TB programs worldwide and finances proposals worth \$3,200,000,000 in 112 countries, and TB treatment for 6,000,000 and HIV/TB services for 1,800,000, and in many countries in which the Global Fund supports programs, TB prevalence is declining, as are TB mortality rates; and

Whereas March 24, 2010, is World Tuberculosis Day, a day that commemorates the date in 1882 when Dr. Robert Koch announced

his discovery of *Mycobacterium tuberculosis*, the bacteria that causes tuberculosis: Now, therefore, be it

*Resolved*, That the House of Representatives—

(1) supports the goals of World TB Day to raise awareness about tuberculosis;

(2) commends the progress made by United States-led anti-tuberculosis programs; and

(3) reaffirms its commitment to global tuberculosis control made through the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. ENGEL) and the gentlewoman from Florida (Ms. ROS-LEHTINEN) each will control 20 minutes.

The Chair recognizes the gentleman from New York.

#### GENERAL LEAVE

Mr. ENGEL. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. ENGEL. Mr. Speaker, I yield myself as much time as I may consume.

Mr. Speaker, this is my resolution, and I am proud to be the lead sponsor of it. And I rise today in honor of this resolution to fight tuberculosis, which I introduced with my good friends from Texas, TED POE and GENE GREEN.

House Resolution 1155 seeks to commend the progress made by U.S. anti-tuberculosis programs at the CDC, USAID, NIH and Global Fund to Fight AIDS, Tuberculosis and Malaria, and to reaffirm the House's historic commitment to global TB control made through the Lantos-Hyde Act enacted 2 years ago. My own legislation, the Stop Tuberculosis Now Act, was folded into the PEPFAR reauthorization, and I remain grateful to Chairman BERMAN and Ranking Member ROS-LEHTINEN, the gentlewoman from Florida, for their strong support of this significant investment in tuberculosis control. The chairman of the Subcommittee on Africa and Global Health, Mr. PAYNE, is also to be commended for his commitment to tuberculosis control as well.

Mr. Speaker, TB is the second leading global infectious disease killer behind HIV-AIDS, claiming approximately 1.8 million lives each year.

TB is the leading killer of people with HIV-AIDS. TB control must be strengthened as part of a comprehensive approach to women's health. TB is the third leading killer of adult women globally, and women who develop the disease are more likely to die from it than men. The risk of premature birth or having a low birth weight baby double for women with TB, and those who receive a late diagnosis are four times as likely to die in childbirth.

Mr. Speaker, about half a million people fall ill each year with

multidrug-resistant TB, but the World Health Organization estimates that less than 5 percent are receiving appropriate treatment, which is one of the factors fueling the spread of drug-resistant tuberculosis.

Although the number of TB cases in the United States is declining, the nature of this infectious disease presents a persistent public health threat to the United States. Tuberculosis is a significant public health program for the border States of California, Texas, New York, Florida and others.

Drug-resistant TB poses a particular challenge to domestic TB control owing to the high costs of treatment and intensive health care resources required. Treatment costs for multidrug-resistant TB range from \$100,000 to \$300,000 per person, which can cause a significant strain on State public health budgets. In 2008, 107 cases of MDR-TB were reported in the United States. Of particular concern is that four extensively drug-resistant TB cases were reported, double the number from 2007.

H. Res. 1155 calls attention to the critical need for public and private reinvestment into research to develop new TB diagnostics, drugs and vaccines to replace antiquated technologies that hinder our progress against tuberculosis.

Although drugs, diagnostics, and vaccines for TB exist, these technologies are increasingly inadequate for controlling the global epidemic. The most commonly used TB diagnostic in the world, sputum microscopy, is more than 100 years old and lacks sensitivity to detect TB in most HIV-AIDS patients and in children. The TB vaccine, BCG, provides some protection to children, but has little or no effect in preventing pulmonary TB in adults. We will never defeat TB without a public and private research investment into new tuberculosis tools.

I urge my colleagues to vote in favor of H. Res. 1155, to be on record in supporting the global fight against tuberculosis.

I reserve the balance of my time.

Ms. ROS-LEHTINEN. Mr. Speaker, I yield myself such time as I may consume.

I am pleased to rise in support of the gentleman's resolution. Tuberculosis is truly a significant challenge for all of us. It is a disease that respects no borders, that claims the lives of over 1.8 million lives worldwide every year, and that continues to cause needless deaths every day. It is a major threat to peoples living in developing countries, but it is also a health risk here in the United States and in other developed countries.

As this resolution correctly points out, drug therapies that are currently used to treat tuberculosis are proving less and less effective as new and different strains of tuberculosis continue to build and develop resistance to these drugs.

There are about 9.4 million new cases of tuberculosis each year. In addition,

according to recent news reports, it is estimated that 440,000 people worldwide have been infected with deadly multidrug-resistant tuberculosis in 2008 alone.

Just recently, the World Health Organization released a report that underlined the continuing threat from the spread of drug-resistant forms of tuberculosis.

Furthermore, as statistics reported by the World Health Organization note, parts of Africa face a truly staggering threat, due to the large numbers of those suffering from AIDS in those regions who are extremely vulnerable to tuberculosis. In such regions, tuberculosis can indeed be a fatal sentence of rapid and painful death.

The standard drug regimen for tuberculosis is severely outdated. With current treatment methods, patients treated for tuberculosis have to stay on medication for far too long, and that means that there can be lapses in medication that only feed resistance among strains of the disease. And so, new forms of treatment, new forms of therapies, and new vaccines are needed. But what is needed also at a fundamental level is the continued recognition of the dangerous nature of this disease and the commitment to continue the struggle against it.

I thank my colleagues, the gentleman from New York (Mr. ENGEL), my good friend, and the gentleman from Texas (Mr. POE) for introducing this important resolution. Its adoption by this House should reinforce the message that we will continue to support the vital efforts to fight this disease.

Mr. Speaker, I have no further requests for time, so I yield back the balance of my time.

Mr. ENGEL. Mr. Speaker, before I yield back the balance of my time, I want to thank my good friend, Congresswoman ROS-LEHTINEN, who has partnered with me in so much good legislation through the years. And I really do appreciate her support.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. ENGEL) that the House suspend the rules and agree to the resolution, H. Res. 1155, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution, as amended, was agreed to.

A motion to reconsider was laid on the table.

#### APPOINTMENT OF MEMBERS TO PRESIDENT'S EXPORT COUNCIL

The SPEAKER pro tempore. Pursuant to Executive Order 12131, and the order of the House of January 6, 2009, the Chair announces the Speaker's appointment of the following Members of the House to the President's Export Council:

Mr. REICHERT, Washington

Mr. TIBERI, Ohio.